## Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

09/538996

CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMALL ENTITY TYPE		OŘ	OTHER THAN SMALL ENTITY											
FOR			NUMBER FILED		_	NUMBER EXTRA		Γ	RATE	FEE	[	RATE	FEE										
BASIC FEE									\$	345.00	OR		690.00										
то	TAL CLAIMS		12 minus 20			*			X\$ 9=		OR	X\$18=											
	EPENDENT CL		2 minus 3			= *			X39=		OR	X78=											
MULTIPLE DEPENDENT CLAIM PRESENT									+130=		OR	+260=											
* If the difference in column 1 is less than zero, enter "0" in column 2								· L	TOTAL	`	OR	TOTAL	680.00										
CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)									OTHER THAN SMALL ENTITY OR SMALL ENTITY														
-			JMN 1) AIMS		(Colun		(Column 3)	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~			) ' I												
AMENDMENT A	·	REMAINING AFTER AMENDMENT			PF	NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE										
	Total	*		Minus	**		= '		X\$ 9=		· OR	X\$18=											
	Independent	*		Minus	***		=		X39=		OR	X78=											
H	FIRST PRESE	NTATIC	OF ML	JLTIPLE DE	LEN[	JENI CLAIM	<u></u> j	1	+130=		OR	+260=											
İ								L				TOTAL	ļ										
l	•			•		*	•	A	TOTAL ADDIT. FEE		OR ,	ADDIT. FEE	L										
L			umn 1)			Column 2)	(Column 3)																
AMENDMENT B		REM AF	AIMS IAINING FTER NDMENT		PI	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE										
	Total	*		Minus	**		=		X\$ 9=		OR	X\$18=											
	Independent	*		Minus	***		= '	<b> </b>	X39=		OR	X78=											
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								-		1	<b> </b>											
								Ĺ	+130=		OR	+260=											
									TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE											
L			umn 1)	_		Column 2)	(Column 3)	1		<u>.                                    </u>													
AMENDMENT C		REM AF	AIMS IAINING FTER NDMENT		PI	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE										
	Total	*	. , .	Minus	**		=		X\$ 9=		OR	X\$18=											
	Independent	*		Minus	**		= '.		X39=			X78=											
	FIRST PRESENTATION OF MULTIPLE D				PENI	DENT CLAIM		<b>!</b>			OR	<u> </u>	<del>                                     </del>										
Ĺ	16 Ala		lage Mr.	No eminor		) 111-14- 407	dumo 2		+130=		OR	+260=											
**	If the "Highest Nu *If the "Highest Nu	ımber Pr ımber Pr	eviously Pareviously Pa	aid For" IN TH aid For" IN TH	IIS SP IIS SP	PACE is less that PACE is less that	an 20, enter "20. an 3, enter "3."			propriate bo	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												